

**NHS Tayside**

**Musculoskeletal and A+E /  
Surgery and Oncology  
Wards 7 & 8 Perth Royal Infirmary  
Wards 7, 8, 9, HDU, 10, 11, 12, 16,  
17, 18, 19 Ninewells Hospital**

**Protocol for administration of Oral  
Morphine Sulphate 10mg/5ml  
Solution in doses of 5ml or less**

**Authors: NHS Tayside Pain  
Team**

**Review Group: NHS Tayside Acute  
Pain Team Members**

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## 1. Purpose and Scope

**This protocol refers to prescriptions for Morphine Sulphate 10mg/5ml solution in doses of 5ml or less taken from 100ml bottles only.**

The purpose of this document is to provide the background and outline the procedure to be followed when dispensing Morphine Sulphate 10mg/5ml solution in doses of 5ml or less, from 100ml bottles.

This protocol can be used on the following designated wards:

7 and 8, Perth Royal Infirmary and wards 7, 8, 9, HDU, 10, 11, 12, 16, 17, 18 and 19 Ninewells Hospital.

## 2. Statement of Protocol

Morphine Sulphate 10mg/5ml Unit Dose Vials (UDV) will no longer be available after March 2008.

Instead, wards can order Morphine Sulphate 10mg/5ml solution in 100ml bottles.

Morphine sulphate preparations up to 10mg/5ml are controlled by the Misuse of Drugs Act but are exempt from all restrictions under the regulations except that the invoice or a copy of it must be kept for 2 years.<sup>1</sup>

In many ward areas Morphine Sulphate 10mg/5ml UDV's or solution are handled as full controlled drugs, requiring two members of staff to administer a dose. This involved procedure can lead to delays in treating a patient's pain and may be detrimental to their overall care, especially following surgery.

This protocol, when implemented in the designated areas as outlined above will enable appropriately competent nurses to administer Morphine Sulphate 10mg/5ml solution in doses **up to 5mls** to patients without the check from an additional nurse, therefore reducing the delays in treatment of pain.

**Please note that doses of oral Morphine Sulphate greater than 5ml (10mg) must be treated as a controlled drug and are subject to standard administration and recording requirements.** The doses must be taken from the controlled drug cupboard stock and not the drug trolley.

### **Protocol for the administration of Morphine Sulphate 10mg/5ml solution in doses of 5ml or less from 100ml bottles.**

Registered nurses, with 6 months experience and who have completed the Medicines Administration Clinical Skills Pack, will be able to administer **up to 5ml** of Morphine Sulphate 10mg/5ml solution without a second check.

Morphine Sulphate 10mg/5ml solution 100ml bottles will be ordered from pharmacy in the Ward Controlled Drug Order book, will be stored in the ward controlled drug cupboard and recorded in the main ward controlled drug register in the usual manner.

Each drug trolley on the ward will have a separate controlled drug register for the sole purpose of recording Morphine Sulphate 10mg/5ml solution administration. Two registered nurses will sign out one 100ml bottle of Morphine Sulphate 10mg/5ml solution from the main controlled drug cupboard for storage in the drug trolley. This will be recorded in the trolley controlled drug register. A suitable self-sealing bung will be attached to the bottle.

When doses of up to 10mg (**5ml**) of Morphine Sulphate oral solution are prescribed, one nurse may administer the dose and record the administration on the TPAR and the trolley controlled drug register.

The nurse will use a disposable **5ml** syringe to accurately measure the dose and transfer to a medicine cup or spoon for administration to the patient. The syringe will then be disposed of and a new syringe used for each patient administration.

**Where doses greater than 10mg (more than 5ml) are prescribed**, this will be dealt with as any other controlled drug ie. It will be taken from the ward controlled drug cupboard, recorded in the ward controlled drug register and witnessed by two registered nurses.

### **Stock Balance/ New Stock Procedure**

If there is an insufficient volume left in the bottle to deliver a prescribed dose, two registered nurses will witness discarding this volume and record this in the register. The full dose will be taken from a new bottle.

At the end of each 100ml bottle, two registered nurses will check that the remaining balance tallies with the register and sign a new 100ml bottle into the trolley and adjust the register accordingly – 100ml start volume.

Any discrepancy more than 10mls will be reported to the Senior Nurse and appropriate action taken.

### **Reference.**

1. Medicines, Ethics and Practice. A guide for pharmacists. RPSGB July 2007

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### **Ratification.**

Medicine Protocol Group – May 2008

Arlene Wood – Senior Practice Development Nurse

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NHS Tayside Drug and Therapeutics Committee – August 2008